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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/671,798
	Filing Date	9/29/2003
	First Named Inventor	Armin MEISL
	Title	System and Method for Implementing
	Art Unit	2616
	Examiner Name	
	Attorney Docket Number	337133-00010

I hereby revoke all previous powers of attorney given in the above-identified application.

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 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>B. A. Zabawsky</i>	Date	March 6, 2008
Name	Bolidan Zabawsky	Telephone	905 625 2392
Title and Company	CTO - REDKUBE INC.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of _____ forms are submitted.

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